



Department of Human Resources
311 West Saratoga Street
Baltimore MD 21201

Family Investment Administration
ACTION TRANSMITTAL

Control Number: #12-11 Revised

Effective Date: November 1, 2011

Issuance Date: **November 30, 2011**

TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
FAMILY INVESTMENT SUPERVISORS
HEALTH OFFICERS, LOCAL HEALTH DEPARTMENTS
LOCAL HEALTH DEPARTMENT ELIGIBILITY STAFF

FROM: ROSEMARY MALONE, EXECUTIVE DIRECTOR, FIA
DEBBIE RUPPERT, EXECUTIVE DIRECTOR, DHMH/OES

RE: PROCEDURAL CHANGES FOR UNDOCUMENTED OR UNQUALIFIED
ALIENS (X02 COVERAGE GROUP)

PROGRAM AFFECTED: MEDICAL ASSISTANCE

ORIGINATING OFFICE: OFFICE OF ELIGIBILITY SERVICES

SUMMARY OF EXISTING POLICY:

A "non-qualified" alien may be eligible for federal coverage of treatment for an emergency medical condition only. An undocumented or unqualified alien may qualify for X02 coverage if the individual fails to meet the citizenship/alien requirements but otherwise qualifies for a community coverage group with full federal benefits under MA COMAR 10.09.24 or MCHP COMAR 10.09.11 (except for coverage groups P13 or P14). The individual must meet all of the financial and technical requirements for MA or MCHP eligibility, except the technical requirements related to citizenship/alien status and a Social Security number (SSN).

NOTE: The non-financial eligibility requirements for X02 include Maryland residency.

The eligibility case worker may not require that an alien applying for only emergency medical services in coverage group X02 declare or provide verification of immigration status. Do not require the applicant to provide a Social Security number (SSN) or apply for an SSN. However, if information already exists in the record about the applicant's immigration status and/or SSN, the case worker must use that information when determining eligibility.

Do not require information on the immigration status or SSN of someone who is not applying for public benefits, such as the applicant's spouse or parents.

A "non-qualified" alien may only be eligible for coverage group X02 if the alien needs care and services for the treatment of an emergency medical condition. An emergency medical condition (including labor and delivery) occurs after a sudden onset and manifests itself by acute symptoms of sufficient severity (including severe pain) so that the absence of immediate medical attention can reasonably be expected by a prudent layperson possessing an average knowledge of health and medicine to result in:

- Placing the patient's health in serious jeopardy;
- Serious impairment to bodily functions; or
- Serious dysfunction of any bodily organ or part.

NOTE: The procedure for labor and delivery for X02 pregnant women has NOT changed.

The months approved for the emergency service are the only months in the X02 certification period. Previously, the Department of Health and Mental Hygiene/ Office of Eligibility Services (formerly Beneficiary Services Administration) provided the approval.

ACTION REQUIRED:

We have made modifications to the process for obtaining medical review for emergency medical services (other than labor and delivery) for X02 aliens. Effective November 1, 2011, do not forward the DES 401 to the Office of Eligibility Services. We have revised the DES 401. Forward the revised form to the Medicaid Utilization Control Agent (UCA) via mail or fax at the address below. The UCA will review the emergency medical documentation submitted. They determine if the undocumented or unqualified alien is eligible for Medicaid due to receiving emergency medical services.

Delmarva Foundation
Attn: MDMA Acute
6940 Columbia Gateway Drive, Suite 420
Columbia, MD 21046-2788
1-888-513-1995 (fax number)

Case managers will continue to request, obtain and submit:

- Only the discharge summaries with admission and discharge dates,
- ER admission documentation, and
- ER documentation that verifies that the medical services received were of an emergency nature.

If any additional medical documentation is required to initiate the medical necessity review for emergency services as specified in the Code of Maryland Regulations, the UCA will request it directly from the hospitals. Those hospitals without the capability of uploading medical records to the UCA portal upon request, have been given instructions for faxing or mailing the medical records to the UCA.

Modifications to the revised DES 401 are as follows:

- As stated above, the DES 401 will be forwarded to the UCA
- The name of the Facility is featured more prominently
- The date of birth for the customer is added
- The Head of Household (if not the customer) is added
- Case managers will no longer attach the MMIS Screen 1 and the SRT determination.

NOTE: Case managers are responsible for ensuring that the technical and financial information for the applicant is reviewed and meets the MA requirements except for citizenship before the DES 401 is forwarded to the UCA.

The expectation is the UCA will handle the backlog of emergency decisions by December 31, 2011. Do not send duplicate requests. The UCA will render decisions within 10 days once the backlog is completed.

DO NOT contact the UCA for the status of an emergency decision. All case manager questions and concerns regarding an emergency decision should be directed to 410-767-1594. Providers already have a Provider Services Number for the UCA if they have questions and/or concerns with the submission of medical records.

REMINDERS:

CARES is not programmed with eligibility policy for X02. Therefore, eligibility must be determined off-line using the rules for the most appropriate community-based MA or MCHP coverage group with full benefits in the F, P, or S track (except for P13 or P14). **All of the non-financial and financial eligibility requirements for that coverage group are applied.** For example:

- The case manager must verify that the applicant is a Maryland resident, with the intent to remain permanently or indefinitely.
- The assistance unit must meet the income and resource standards for the

appropriate coverage group. The assistance unit rules are applied, so that the income and resources are considered of the applicant's spouse or of the parents for a minor child applicant. However, resources are not considered for a child or pregnant woman being considered under the MCHP rules for the P-track.

- Apply the medically needy Aged, Blind or Disabled rules if the applicant is 21 to 64 years old and is not the parent or other caretaker relative of a minor child living with the applicant. **The Social Security Administration (SSA) or the Department of Human Resources' State Review Team (SRT) must determine the applicant disabled before the DES 401 is forwarded to Delmarva.** (AT #11-13 indicates that the SRT will strive to make disability determination case decisions within 60 days when the applicant is ineligible to apply for SSA benefits.)
- If the applicant's eligibility is being determined for a medically needy coverage group and the assistance unit income exceeds the limit, the applicant must spend down with incurred medical expenses before X02 coverage is approved for the emergency medical services.

ATTACHMENT

DES 401 form

INQUIRIES:

Please direct Medicaid eligibility policy questions to DHMH Division of Eligibility Policy at 410-767-1463 or 1-800-492-5231 (select option 2 and request extension 1463).

**EMERGENCY SERVICES TO
UNDOCUMENTED OR UNQUALIFIED ALIENS**

Date: _____

TO: Delmarva Foundation
Attn: MDMA Acute
6940 Columbia Gateway Drive, Suite 420
Columbia, MD 21046-2788
1-888-513-1995 (fax number)

FROM: Local Department Name: _____

Local Department Address: _____

Case Worker's Name: _____

Telephone #: _____

SUBJECT: Determination of Emergency Services – Aliens

Customer Name: _____

Customer Date of Birth: _____

Head of Household Name (if not the customer): _____

Case Number: _____

Date of MA Application: _____

Facility Name: _____

The above-named applicant has submitted a Medical Assistance application for coverage of emergency services received from _____ to _____
(date) (date)

Federal category for which the applicant is eligible, but for his/her alien status:

☐ FAC ☐ MCHP ☐ Aged ☐ Disabled/Blind

A copy of the following must be attached:

- ☐ Discharge summary with admission and discharge dates
- ☐ ER admission
- ☐ Documentation showing the emergency nature of the medical services

I have checked and agree that the technical and financial information for the applicant has been reviewed and meets the MA requirements except for citizenship.

Caseworker Signature: _____
(Please sign your name)

Note: No bills or other extraneous information should be submitted.